

REQUEST FOR QUOTATION HQ941195

Quotations are due by 3:00 P.M., Local Time December 8, 2008

ARIZONA DEPARTMENT OF HEALTH SERVICES

1740 W. Adams Phoenix, AZ 85007 Phone: (602) 542-1040 Fax: (602) 542-1741

Date: November 21, 2008

VENDOR NOTICE

THIS IS NOT A PURCHASE ORDER

The terms and conditions attached to this form should be reviewed and understood before preparing a quotation.

The <u>Uniform Terms and Conditions</u> and <u>Uniform Instructions to Offerors</u> are <u>incorporated into this document by reference</u>, and may be obtained by visiting: http://www.azeps.az.gov/PoliciesDocuments/terms/UICv7.pdf for the Instructions, http://www.azeps.az.gov/PoliciesDocuments/terms/UICv7.pdf for the Terms and Conditions

In accordance with Arizona Revised Statute 35-393.06, the offeror hereby certifies that the offeror does not have scrutinized business operations in Iran.

In accordance with Arizona Revised Statute 35-391.06, the offeror hereby certifies that the offeror does not have any scrutinized business operations in Sudan.

In accordance with Arizona Revised Statute 41-2535(B), this purchase is restricted to small businesses, if practicable. By signing this form, the Offeror self certifies that it is a small business as defined above. Please check as many as applicable:

____I certify that my company is a Small Business. A Small Business is defined as a company having fewer than one hundred (100) employees or less than four million dollars (\$4,000,000) in gross receipts.

I certify that my company is a Woman-Owned Business Enterprise (WBE). A WBE is defined as an enterprise where a woman owns at least fifty-one percent (51%)of the business. The owner(s) must have the day-to-day control of the firm and have experience and expertise in the firm's primary area of operation. The owner(s) must hold a proportionate share of the business capital, assets, profits and losses commensurate with their ownership interest.

I certify that my company is a Minority-Owned Business Enterprise (MBE). An MBE is defined as an enterprise where an ethnic minority owns at least fifty-one percent (51%) of the business. The owner(s) must have the day-to-day control of the firm and have experience and expertise in the firm's primary area of operation. The owner(s) must hold a proportionate share of the business capital, assets, profits and losses commensurate with their ownership interest.

Submittal Location: 1740 West Adams, Room 303 Phoenix, AZ 85007		Delivery / Pi 2500 East V	Delivery / Pick Up Location: 2500 East Van Buren Street Phoenix, AZ 85008			Procurement Specialist: Tracy Chisler Phone: (602)542-1044 Fax: (602) 542-1741 Email: chislet@azdhs.gov		
Item	Description	on of Material or Service]]	Frequency		Unit Rate		
1	Inspection and Maintenance of the Fire Alarm & Fire Sprinkler Systems at the Arizona State Hospital			cted in the Scope of Work	\$ /month			/month
2		oor rate (Other than 7AM-5PM y, excluding State Holidays)		As needed	\$ /hour			
3	in described fire	of additional parts not included re alarm and fire sprinkler ion and maintenance		As needed	%			
Delivery to be FOB Destination.				Sub-Total: \$ n/a		n/a		
Prices to include shipping charges. No additional charges will be allowed. Refer to Page Three (3) for information concerning a tour of the Hospital facilities.				State Hospital is Tax-Exempt :		\$	0.00	
				Total: \$		\$	n/a	
THIS SECTION MUST BE COMPLETED BY VENDOR								
Delivery shall be made calendar days after receipt of order. Payment Terms:								
Company Nam	ne Add	Iress	City	State	Zip Code	Phone N	No.	Fax No.
Signature Da				Typed Name and Title				
Procurement Administrator:				.]	Date:			

SPECIAL INSTRUCTIONS TO OFFERERS Solicitation No. HQ941195

- A. **SUBMISSION:** Quotations shall be signed by the offeror where applicable and delivered as designated no later than the date and time indicated on the first page of the document.
- B. **INQUIRIES:** All inquiries must be submitted in writing to the Solicitation contact person, and within two (2) days before the Offer due date and time to allow sufficient time for question review and response.
- C. **IDENTIFICATION**: Offeror agrees to provide a federal identifier (EIN or SSN) for the purposes of reporting to the appropriate taxing authorities, monies paid by the State under this contract.
- D. **OPENING:** This is an informal quotation, which will not be read at a public opening; however, the information may be publicly reviewed after an award.
- E. **STANDARD PROVISIONS:** The State of Arizona's Uniform Instructions and Uniform Terms and Conditions, where applicable, are a part of this document as if fully set forth herein. Copies of these documents are available from the A.D.H.S. Procurement Office or may be viewed at Arizona Department of Administration webpage at http://www.azdoa.gov/.
- F. **TAXES:** The State of Arizona is exempt from Federal excise Tax, including the Federal Transportation Tax. The Arizona State Hospital is exempt from State Sales Tax.
- G. **BID REJECTION:** The State reserves the right to reject any, or all, bids, combinations of items, or lot, and to waive defects or informalities.
- H. **ERASURE**; Erasures, inter-lineation or other modifications must be initialed by the individual signing the Request for Quotation.
- I. BRAND NAMES: Any manufacturer's names, trade names, brand names or catalog numbers used in the specifications are for the purpose of describing and establishing the general quality level, design and performance desired. Such references are not intended to limit or restrict bidding by other vendors but are intended to approximate the quality design or performance, which is desired. Any bid that proposes like quality, design or performance will be considered. If the description of your offer differs in any way, you must give a complete detailed description of your quotation including pictures and literature where applicable. Unless a specific exception is made, the assumption will be that you are bidding exactly as specified on the Request for Quotation.
- J. **UNIT PRICE:** In case of error in the extension prices in the Quotation the unit price will govern. No Quotation shall be altered, amended or withdrawn after the specific date and time for receiving Quotations. Negligence by the vendor in preparing the Quotation confers no right for the withdrawal of the quotation after it has been opened.
- K. **ESTIMATED QUANTITIES:** The State anticipates considerable activity resulting from contracts that will be awarded as a result of this Solicitation; however, no commitment of any kind is made concerning quantities actually required and that fact should be taken into consideration by each potential contractor.
- L. **NEGOTIATIONS:** Negotiations may be held.
- M. **EVALUATION**: Award shall be made based on the lowest price, and the responsible and responsive bidder whose bid conforms in all material respect to the requirements set forth in the request for quotation, and is determined to be the most advantageous to the State.
- N. **PAYMENT:** The state will make every effort to process payment for the purchase of goods or services within thirty (30) calendar days after receipt of goods or services and a correct notice of amount due, unless a good faith dispute exists as to any obligation to pay all or a portion of the account. Any offer that requires payment in less than thirty (30) calendar days shall not be considered.
- O. **ARIZONA PROCUREMENT CODE:** The Arizona Procurement Code (A.R.S. Title 41), Chapter 23 is available at most public libraries; A.C.C.R. Title 2, Chapter 7 may be purchased from the Arizona Secretary of State; and both are available for review at the D.H.S. Procurement Office. They may be viewed at Arizona Department of Administration webpage at http://www.azdoa.gov/
- P. **REASONS FOR CANCELLATION:** Failure to provide materials, supplies or equipment in accordance with specifications or failure to meet the stated delivery commitment shall be cause for IMMEDIATE cancellation of the contract.
- Q. ADDITIONAL TERMS AND CONDITIONS: Submission of additional terms, conditions or agreements with

SPECIAL INSTRUCTIONS TO OFFERERS Solicitation No. HQ941195

the bid document may result in bid rejection.

R. **LICENSES:** The Contractor shall obtain and maintain in current status any required federal, state, county, city and local licenses, permits or certifications for the Contractor, their employees and subcontractors required for the operation of the business conducted by the Contractor. Contractor shall submit a list of all licenses and certifications they hold.

S. FACILITIES TOUR:

Prospective bidders are invited to attend a tour of the Hospital facilities. The date, time and location of this tour are indicated below. The purpose of this tour is to provide prospective bidders the opportunity to see the location and carefully examine the entire site of the task and to make all necessary investigations to inform themselves thoroughly as to the facilities available as well as to all the difficulties involved in the completion of work in accordance with the specifications under which this Contract will be administered. Bidders are invited to examine all plans and data mentioned in the specifications.

In the event the bidder is awarded a contract, no plea of ignorance of conditions that exist, or may hereafter exist, or of difficulties that may be encountered in the execution of the task under the contract will be accepted as an excuse for any failure or omission on the part of the contractor to fulfill in every detail all of the requirements of the contract, nor accepted as basis for any claims for extra compensation.

A written record will be kept of those bidders who inspected the facilities.

Tour date: December 1, 2008
Tour time: 1:00-2:00 PM

Tour location: Arizona State Hospital, 2500 East Van Buren Street, Phoenix, AZ 85008 at the Facilities

Building

SPECIAL TERMS AND CONDITIONS REQUEST FOR QUOTATION # HQ941195

A. PURPOSE

Pursuant to provisions of the Arizona Procurement Code, A.R.S. '41-2501 Et Seq., the State of Arizona, Department of Health Services ("ADHS") intends to establish a contract for the materials or services listed herein for the Arizona State Hospital in accordance with the requirements outlined herein.

B. TERM OF CONTRACT (3 YEARS)

The term of the resultant Contract shall commence upon award date on the Offer and Acceptance form, and shall remain in effect for three (3) years, unless terminated, canceled, or extended as otherwise provided herein.

C. CONTRACT EXTENSIONS (2 YEAR MAXIMUM)

The Department may, by mutual written Contract amendment, extend any resultant Contract in twelve (12) month increments for a maximum of two (2) years. The Contract term shall not exceed a total of five (5) years from the date of Contract award, or \$50,000, whichever comes first.

D. CONTRACT TYPE

X Fixed Price

E. PRICE ADJUSTMENT

Contractor prices accepted and subsequently awarded by a Contract shall remain in effect for a minimum of one (1) year. The Contractor may request a price adjustment, but the State will not review or approve an increase until the Contract has been in effect for one (1) year. The ADHS Procurement Office will review any requested rate increase to determine whether such request is reasonable in relation to increased supplier or material costs. Contractor shall provide written justification for any price adjustment requested, including information contained in the Consumer Price Index or similar official cost analysis to support any requested price increase. Any price increase adjustment, if approved, will be effective upon execution of a written Contract amendment. Likewise, the Contractor shall offer the State a price adjustment reduction concurrent with reduced costs from their suppliers. Price reductions will become effective upon execution of a Contract amendment.

F. TAX EXEMPTION

The Hospital is exempt from sales tax. In accordance with the State of Arizona Transaction Privilege and Use Tax Audit, the Contractor agrees that it will not charge sales tax for this project. A copy will be provided at Contract award.

G. SINGLE AWARD CONTRACT

This is an all or nothing bid. All items within this solicitation have been grouped together for purposes of obtaining these items collectively from a single source. To be considered for award of this solicitation, the bidder is required to provide prices on all items within this solicitation. Failure to provide pricing for any item within the solicitation shall result in the bidder being declared non-responsive and ineligible to receive an award.

H. NON-EXCLUSIVE CONTRACT

Any Contract resulting from this solicitation shall be awarded with the understanding and agreement that it is for the sole convenience of the State of Arizona. The State reserves the right to obtain like goods or services from another source when necessary, or when determined to be in the best interest of the State.

I. INFORMATION DISCLOSURE

The Contractor shall establish and maintain procedures and controls that are acceptable to the state for the purpose of assuring that no information contained in its records or obtained from the state or from others in carrying out its functions under the Contract shall be used or disclosed by it, its agents, officers, or employees, except as required to efficiently perform duties under the Contract. Persons requesting such information should be referred to the state. The Contractor also agrees that any information pertaining to individual persons shall not be divulged other than to employees or officers of contractor as needed for

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the performance of duties under the Contract, unless otherwise agreed to in writing by the state.

J. CONTRACTOR PERFORMANCE REPORTS

Program management shall document vendor performance, both exemplary and needing improvements where corrective action is needed or desired. Copies of corrective action reports will be forwarded to the ADHS Procurement Office for review and any necessary follow-up. The Procurement Office may contact the Contractor upon receipt of the report and may request corrective action. The Procurement Office shall discuss the Contractor's suggested corrective action plan with the Contract Manager for approval of the plan.

K. AUTHORIZATION FOR PURCHASE OF GOODS

Authorization for purchase of goods under this Contract shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the contract number and the dollar amount of funds authorized. The Contractor shall only be authorized to charge for items up to the amount on the Purchase Order. ADHS shall not have any legal obligation to pay for items in excess of the amount indicated on the Purchase Order. No further obligation for payment shall exist on behalf of ADHS unless: a) the Purchase Order is changed or modified with an official ADHS Procurement Change Order, and/or b) an additional Purchase Order is issued for purchase of goods under this contract.

L. LICENSES

The Contractor shall maintain in current status, all federal, state, and local licenses and permits required for the operation of the business conducted by the Contractor.

M. REGULATIONS

All items supplied on this contract shall comply with the current applicable occupational safety and health standards of the State of Arizona Industrial Commission, the National Electric Code, and the National Fire Protection Association Standards.

N. DEFECTIVE PRODUCTS

All defective products shall be replaced and exchanged by the Contractor. The cost of transportation, unpacking, inspection, repacking, reshipping or other like expenses shall be paid by the Contractor. All replacement products shall be received by the State within seven (7) days of initial notification.

O. WARRANTY (12 MONTHS)

All equipment supplied under these specifications shall be fully guaranteed against any mechanical and electrical defects for a period of twelve (12) months from the date of acceptance or component manufacturer's warranty, whichever is greater. This guarantee shall cover such items as actual repair labor, parts and shipping charges to and from the nearest service facility or other designated repair depot. Any defects of design, workmanship or material, shall be fully corrected by the Contractor without cost to the state. The equipment shall be warranted to meet, at the time of installation, all requirements of this specification for normal conditions of installation and adjustment.

P. ESTIMATED USAGE

The Contract shall be on an as needed, if needed basis. The State makes no guarantee as to the number of hours required.

O. PAYMENT/INVOICING

The Contractor will be paid in accordance with the proposed Contract amount, as accepted by the Arizona Department of Health Services, and the Arizona State Hospital. The Contractor's sole compensation will be from the proposed amounts annotated on the pricing sheet. The State will not pay for services and/or products in advance. Payments will be made monthly, for completion of services as shown by an itemized invoice, submitted by the Contractor by the 30th day of the month following service. Payments will not be authorized if the invoice submitted is incomplete or does not contain the necessary information needed to properly review. Payment for items not authorized under this Contract will be rejected.

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R. VENDOR REGISTRATION

Prior to issuance of a Purchase Order and subsequent payment and/or formal award, the Contractor shall have a completed STATE OF ARIZONA SUBSTITUTE W-9 FORM on file with the State. No payments shall be made until the form is on file. The STATE OF ARIZONA SUBSTITUTE W-9 FORM will be provided to the Contractor at the time of Award and must be completely filled out and returned prior to the start of any project for the State.

S. COMPLIANCE REQUIREMENTS FOR A.R.S. §41-4401, GOVERNMENT PROCUREMENT: E-VERIFY REQUIREMENT

- 1. The Contractor warrants compliance with all Federal immigration laws and regulations relating to employees and warrants its compliance with A.R.S. § 23-214, Subsection A.
- 2. A breach of warranty regarding compliance with immigration laws and regulations shall be deemed a material breach of the Contract and the Contractor may be subject to penalties up to and including termination of the Contract.
- 3. Failure to comply with a State audit process to randomly verify the employment records of Contractors and Subcontractors shall be deemed a material breach of the Contract and the Contractor may be subject to penalties up to and including termination of the Contract.
- 4. The State Agency retains the legal right to inspect the papers of any employee who works on the Contract to ensure that the Contractor or Subcontractor is complying with the warranty under paragraph 1.

T. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) OF 1996

The Contractor warrants that it is familiar with the requirements of HIPAA and HIPAA's accompanying regulations and will comply with all applicable HIPAA requirements in the course of this Contract. Contractor warrants that it will cooperate with the Arizona Department of Health Services (ADHS) in the course of performance of the Contract so that both the ADHS and Contractor will be in compliance with HIPAA, including cooperation and coordination with the ADHS Privacy Officer and other compliance officials required by HIPAA and its regulations. Contractor will sign any documents that are reasonably necessary to keep the ADHS and Contractor in compliance with HIPAA, including, but not limited to, business associate agreements.

If requested by the ADHS, Contractor agrees to sign the "Arizona Department of Health Services Pledge to Protect Confidential Information" and to abide by the statements addressing the creation, Use and Disclosure of confidential information, including information designated as protected health information and all other confidential or sensitive information as defined in policy. In addition, if requested, Contractor agrees to attend or participate in HIPAA training offered by the ADHS or to provide written verification that the Contractor has attended or participated in job related HIPAA training that is: (1) intended to make the Contractor proficient in HIPAA for purposes of performing the services required and (2) presented by a HIPAA Privacy Officer or other person or program knowledgeable and experienced in HIPAA and who has been approved by the ADHS HIPAA Compliance Officer.

U. INDEMNIFICATION

Contractor agrees to indemnify, defend, save and hold harmless the State of Arizona, and their respective directors, officers, officials, agents and employees (hereinafter referred to as "Indemnitee") from and against any and all claims, actions, liabilities, costs, losses, or expenses, including reasonable attorney's fees, (hereinafter collectively referred to as "Claims") arising out of actual or alleged bodily injury or personal injury of any person (including death) or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Contractor or any of Contractor's directors, officers, agents, employees, volunteers or subcontractors. This indemnity includes any claim or amount arising or recovered under the Workers' Compensation Law or arising out of the failure of Contractor to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by Contractor from and against any and all Claims. It is agreed that Contractor will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable.

This indemnity shall not apply if the contractor or sub-contractor(s) is/are an agency, board, commission or university of the State of Arizona.

V. INSURANCE REQUIREMENTS

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Vendor shall procure and maintain, until all of their obligations, including any warranty periods under this Contract, are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the purchase and or use of the commodity.

The *insurance requirements* herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Vendor from liabilities that might arise out of the purchase and use of the commodities sold under this Contract by the Vendor, his agents, representatives, employees or subcontractors and Vendor is free to purchase such additional insurance as may be determined necessary.

1. <u>MINIMUM SCOPE AND LIMITS OF INSURANCE:</u> Contractor shall provide coverage with limits of liability not less than those stated below.

1.1 Commercial General Liability – Occurrence Form

Policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

•	General Aggregate	\$2,000,000
•	Products – Completed Operations Aggregate	\$1,000,000
•	Personal and Advertising Injury	\$1,000,000
•	Blanket Contractual Liability – Written and Oral	\$1,000,000
•	Fire Legal Liability	\$ 50,000
•	Each Occurrence	\$1,000,000

- 1.1.1 The policy shall be endorsed to include the following additional insured language: "The Department of Health Services, the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor".
- 1.1.2 Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.

1.2 Worker's Compensation and Employers' Liability

Workers' Compensation	Statutory		
Employers' Liability			
Each Accident	\$ 500,000		
Disease – Each Employee	\$ 500,000		
Disease – Policy Limit	\$1,000,000		

- 1.2.1 Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.
- 1.2.2 This requirement shall not apply to: Separately, EACH Contractor or subcontractors exempt under A.R.S. 23-901, and when such Contractor or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form.
- **ADDITIONAL INSURANCE REQUIREMENTS:** The policies shall include, or be endorsed to include, the following provisions:
 - **2.1** The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees wherever additional insured status is required such additional insured shall be covered to the full limits of liability purchased by the Contractor, even if those limits of liability are in excess of those required by this Contract.
 - 2.2 The Contractor's insurance coverage shall be primary insurance with respect to all other available sources.
 - **2.3** Coverage provided by the Contractor shall not be limited to the liability assumed under the indemnification provisions of this Contract.

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- 3. NOTICE OF CANCELLATION: Each insurance policy required by the insurance provisions of this Contract shall provide the required coverage and shall not be suspended, voided, canceled, or reduced in coverage or in limits except after thirty (30) days prior written notice has been given to the State of Arizona. Such notice shall be sent directly to The Arizona Department of Health Services, Procurement Office, 1740 West Adams, Room 303, Phoenix, AZ 85007 and shall be sent by certified mail, return receipt requested.
- **ACCEPTABILITY OF INSURERS:** Insurance is to be placed with duly licensed or approved non-admitted insurers in the state of Arizona with an "A.M. Best" rating of not less than A-VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Contractor from potential insurer insolvency.
- 5. <u>VERIFICATION OF COVERAGE:</u> Contractor shall furnish the State of Arizona with certificates of insurance (ACORD form or equivalent approved by the State of Arizona) as required by this Contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.

All certificates and endorsements are to be received and approved by the State of Arizona before work commences. Each insurance policy required by this Contract must be in effect at or prior to commencement of work under this Contract and remain in effect for the duration of the project. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of contract.

All certificates required by this Contract shall be sent directly to **The Arizona Department of Health Services**, **Procurement Office**, **1740 West Adams**, **Room 303**, **Phoenix**, **AZ 85007**. The State of Arizona project/contract number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete, certified copies of all insurance policies required by this Contract at any time. **DO NOT SEND CERTIFICATES OF INSURANCE TO THE STATE OF ARIZONA'S RISK MANAGEMENT SECTION**.

- **SUBCONTRACTORS:** Contractors' certificate(s) shall include all subcontractors as insureds under its policies or Contractor shall furnish to the State of Arizona separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.
- 7. <u>MULTIPLE AWARDS:</u> To provide adequate contract coverage, multiple awards may be made.
- **8**. **APPROVAL:** Any modification or variation from the *insurance requirements* in this Contract shall be made by the Department of Administration, Risk Management Section, whose decision shall be final. Such action will not require a formal Contract amendment, but may be made by administrative action.
- **EXCEPTIONS:** In the event the Contractor or subcontractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a Certificate of Self-insurance. If the Contractor or subcontractor(s) is/are a State of Arizona agency, board, commission, or university, none of the above shall apply.

W. OFFSHORE PERFORMANCE OF WORK PROHIBITED

Due to security and identity protection concerns, direct services under this Contract shall be performed within the borders of the United States. Any services that are described in the specifications or scope of work that directly serve the State of Arizona or its clients and may involve access to secure or sensitive data or personal client data or development or modification of software for the State shall be performed within the borders of the United States. Unless specifically stated otherwise in the specifications, this definition does not apply to indirect or "overhead" services, redundant back-up services or services that are incidental to the performance of the Contract. This provision applies to work performed by subcontractors at all tiers.

X. PANDEMIC CONTRACTUAL PERFORMANCE

- 1. The State shall require a written plan that illustrates how the Contractor shall perform up to contractual standards in the event of a pandemic. The State may require a copy of the plan at anytime prior to or post award of a contract. At a minimum, the pandemic performance plan shall include:
 - 1.1 Key succession and performance planning if there is a sudden significant decrease in Contractor's workforce.
 - 1.2 Alternative methods to ensure there are products in the supply chain.

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- 1.3 An up to date list of company contacts and organizational chart.
- 2. In the event of a pandemic, as declared by the Governor of Arizona, U.S. Government or the World Health Organization, which makes performance of any term under this Contract impossible or impracticable, the State shall have the following rights:
 - 2.1 After the official declaration of a pandemic, the State may temporarily void the contract(s) in whole or specific sections, if the Contractor cannot perform to the standards agreed upon in the initial terms.
 - 2.2 The State shall not incur any liability if a pandemic is declared and emergency procurements are authorized by the Director as per A.R.S. 41-2537 of the Arizona Procurement Code.
 - 2.3 Once the pandemic is officially declared over and/or the Contractor can demonstrate the ability to perform, the State, at is sole discretion, may reinstate the temporarily voided Contract(s).

Y. TOBACCO PRODUCTS

Beginning July 1, 2008 smoking and the use of any other tobacco products shall not be permitted anywhere on the grounds of the Arizona State Hospital. All Arizona Department of Health Services buildings and grounds are smoke-and tobacco-free.

1. BACKGROUND

The Arizona State Hospital ("Hospital") provides treatment and rehabilitative services to the most severely mentally ill persons in the state. This is a court-ordered and civil-committed treatment center. Individuals must be suffering from a behavioral health illness, which has severely impaired their functioning and ability to live within their family and community.

The Arizona State Legislature enacted A.R.S. 36-3701 in the 1997 legislative session requiring the housing of "sexually violent persons" ("SVP") at the Arizona State Hospital in the Arizona Community Protection and Treatment Center ("ACPTC") program.

ACPTC provides for a secure treatment environment for sexually violent persons ("residents") who have been determined to have a mental disorder and need to be committed to protect the health and safety of others in the community. The ACPTC's current population is approximately 100 residents.

The Hospital is located at 2500 East Van Buren Street, Phoenix, Arizona 85008. The Hospital operates twenty-four hours (24) per day, three hundred sixty-five (365) days per year.

2. **OBJECTIVE**

The Arizona Department of Health Services ("ADHS") would like to establish a contract for fire alarm and fire sprinkler maintenance at the Hospital and the ACPTC.

The Hospital and ACPTC require system testing and ongoing maintenance for the fire alarm system located at the Arizona State Hospital to allow for optimum performance, including, but not limited to, annual testing and testing of the flows and tampers, in accordance with all existing National Fire Protection Association ("NFPA") policies and regulations, including Phoenix Fire Department and all City and State codes.

The Hospital and ACPTC requires quarterly inspections and ongoing maintenance of the fire sprinkler system located at the Arizona State Hospital including, but not limited to, inspection and maintenance of risers, standpipes and fire dampers in accordance with all existing NFPA policies and regulations, including Phoenix Fire Department and all City and State codes.

3. TASKS

The Contractor shall:

- 3.1 Develop and annually update a comprehensive plan for testing and maintaining the fire alarm and fire sprinkler systems at the Hospital including, but not limited to, the following:
 - 3.1.1 Routine maintenance and testing of system mechanical, electrical and electronic devices, switches, alarms, detectors (heat and smoke), sprinklers, panels, circuits, relays, batteries and tampers;
 - 3.1.2 Recommend system improvements and needed replacement of parts or devices;
 - 3.1.3 Obtain approval of the comprehensive plan from the Hospital prior to implementation;
 - 3.1.4 Implement approved comprehensive plan by conducting the first scheduled testing of the systems within thirty (30) days of the contract award date;
 - 3.1.5 Ensure the systems are clear and no alarms are present within a twenty-four (24) hour period of testing;
 - 3.1.6 Provide service for calls placed during normal business hours (Monday through Friday, 7:00 AM to 5:00 PM, excluding State holidays) (see Exhibit A) at no additional charge; and
 - 3.1.7 Respond to emergency calls including, but not limited to, system failure, system impediment, and/or system without protection within four (4) hours of receipt of call.
- 3.2 Inspect fire alarm system annually, including, but not limited to the following:
 - 3.2.1 Perform a fire alarm system test according to NFPA 72® National Fire Alarm Code® codes and standards;

- 3.2.2 Clean smoke and duct detectors for sensitivity annually;
- 3.2.3 Test all waterflows, tampers, heat detectors and pull stations test fan shut down if applicable;
- 3.2.4 Test elevator recall pertaining to the fire alarm system;
- 3.2.5 Test all horns and strobes;
- 3.2.6 Check panel operation and battery condition on main and remote panels;
- 3.2.7 Test all batteries under a power failure;
- 3.2.8 Provide an inspection report and quote, if applicable, of all devices including defective and/or deficient equipment to Assistant Chief Operating Officer ("ACOO") and the Facilities Director at the Hospital; and
- 3.2.9 Perform all fire alarm service during regular business hours as requested Monday through Friday, 7:00 AM to 5:00 PM, excluding State holidays (see Exhibit A).
- 3.3 Inspect fire sprinkler system quarterly, including, but not limited to the following:
 - 3.3.1 Perform water flow test;
 - 3.3.2 Drain and flush entire system;
 - 3.3.3 Inspect operation and lubricate control valves;
 - 3.3.4 Inspect and test tamper switches, flow switches, and water motor gong;
 - 3.3.5 Inspect system for leaks, corrosion and mechanical damage;
 - 3.3.6 Inspect facility via walkthrough for compliance per NFPA 25 (Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems), including, but not limited to, sprinkler heads, piping, gauges, Fire Department connection, spare head boxes, signs;
 - 3.3.7 Provide an inspection report and quote, if applicable, of all devices including defective and/or deficient equipment to the ACOO and the Facilities Director at the Hospital; and
 - 3.3.8 Perform all fire sprinkler service during regular business hours as requested Monday through Friday, 7:00 AM to 5:00 PM, excluding State holidays (see Exhibit A).

4. REOUIREMENTS

- 4.1 The Contractor shall submit factory authorized letters indicating that the Contractor and their technicians that service the Hospital are currently certified to install, maintain, and program IRC-3, EST-3 and the Fire Command Center with Fireworks software equipment;
- 4.2 The Contractor shall meet all licensing requirements of all federal, state and local agencies having statutory or regulatory responsibility for the Fire/Life Safety System. Copies of such licenses and permits shall be maintained by the Contractor and shall be available to the Arizona Department of Health Services upon request;
- 4.3 The Contractor shall provide a detailed inspection report to the Hospital Engineering Department with a copy to be forwarded to the local Fire Department if applicable;
- 4.4 The Contractor shall complete and submit all Federal, State and local reports and documentation within the statutory of regulatory or regulatory periods. Copies of all filed reports shall be submitted to the ACOO and the Facilities Director at the Hospital;

- 4.5 The Contractor shall sign in and out of log provided in the Engineering Office on grounds for all work completed as described on the work report left in the Engineering Office;
- 4.6 The Contractor shall provide the services contained herein in such a manner that does not result in damage to existing grounds, landscaping, utilities, or structures. In the event that damage does occur during the performance of this Contract, the Contractor shall repair or replace the damage at no cost to the Hospital. If the Contractor fails or refuses to make proper repairs or replacements, the Contractor shall be liable for the cost thereof, which may be deducted from any unpaid invoices or by any other means provided by law;
- 4.7 The Contractor shall be responsible for providing all material, labor, travel, services and equipment required to perform the services specified in this Contract, at the prices set forth on the price sheet/fee schedule on page one (1);
- 4.8 The Contractor shall adhere to and comply with Federal, State, County, City, rules, regulations, and standards;
- 4.9 The Contractor shall obey all posted speed limits on Hospital grounds;
- 4.10 No cameras, including cell phones with cameras, are permitted on Hospital property;
- 4.11 The Hospital grounds are drug-, alcohol-, and tobacco-free; and,
- 4.12 No firearms are permitted on Hospital property.

5. APPROVALS

The Contractor will provide written justification of repairs required to maintain the safe and proper operation of the fire alarm and fire sprinkler systems. Approvals of all financial expenditures, including but not limited to, services, reports, and invoices must be obtained from the Hospital.

6. ADDITIONAL REQUIREMENTS AT CONTRACT AWARD

Items to be provided by the Contractor as required within ten (10) days of Contract award, and upon request through the term of the Contract.

- 6.1 Certificate of Liability Insurance
- 6.2 State of Arizona Substitute W-9 form
- 6.3 Proof of license or certification

7. NOTICES, CORRESPONDENCE, REPORTS, INVOICES AND PAYMENTS

7.1 Invoices shall be submitted to the Hospital Business Office within thirty (30) days after delivery. The invoices shall be sent to the following address:

Arizona State Hospital Attn: Business Manager 2500 East Van Buren Street Phoenix, Arizona 85008

7.2 Invoices shall be paid by ADHS within thirty (30) days following receipt of the invoice. In the case of any dispute regarding part of any invoice, ADHS shall pay the undisputed part according to the payment terms described above.

7.3	Notices, Correspondence	ee, Reports and Payments from The Department to the Contractor shall be sent to:
	Contractor	
		Page 12 of 15

Attention:	
Address	
Address	
City, State, Zip	

EXHIBIT AREQUEST FOR QUOTATION # HQ941195

ARIZONA STATE OBSERVED HOLIDAYS
New Year's Day
Martin Luther King, Jr./Civil Rights Day
Lincoln/Washington/Presidents' Day
Memorial Day
Independence Day
Labor Day
Columbus Day
Veterans' Day
Thanksgiving Day
Christmas Day

 $^{^{**}}$ If the holiday falls on a Saturday, then it is observed on Friday. If the holiday falls on Sunday, then it is observed on Monday.

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CERTIFICATE OF INSURANCE

Request for Quote No.: HQ941195

EXAMPLE

ARIZONA DEPARTMENT OF HEALTH SERVICES 1740 West Adams Street

Phoenix, Arizona 85007 (602) 542-1040 (602) 542-1741 FAX

PRIOR TO COMMENCING SERVICES UNDER THIS CONTRACT, THE CONTRACTOR MUST FURNISH THE DEPARTMENT, CERTIFICATION FROM INSURER(S) FOR COVERAGES IN THE MINIMUM AMOUNTS AS STATED BELOW, THE COVERAGES SHALL BE MAINTAINED IN FULL FORCE AND EFFECT DURING THE TERM OF THIS CONTRACT. AND SHALL NOT SERVE TO LIMIT ANY LIABILITIES OR ANY OTHER CONTRACTOR OBLIGATIONS

	ONTRACT, AND SHALL NOT SERVE TO LIMI		IES OR A	ANY OTHER CON	TRACTOR OBLIGATIONS		
NAME AND ADD	COMPANY LETTER	С	COMPANIES AFFORDING COVERAGE				
NAME AND ADD	RESS OF INSURED	A B C D					
	This is to certify that the policies of insurance list	1	n issued to	the insured named	above and are in force at this time		
COMPANY LETTER	TYPE OF INSURANCE	POLICY NUM		POLICY EXPIRATION DATE	LIMITS OF LIABILITY MINIMUM - EACH OCCURRENCE		
	COMPREHENSIVE GENERAL LIABILITY FORM PREMISES OPERATIONS CONTRACTUAL INDEPENDENT CONTRACTORS PRODUCTS/COMPLETED OPERATIONS HAZARD X PERSONAL INJURY BROAD FORM PROPERTY DAMAGE EXPLOSION & COLLAPSE (IF APPLICABLE) UNDERGROUND HAZARD (IF APPLICABLE)				General Aggregate Product-Completed Operations Aggregate Person and Advertising Injury Blanket Contractual Liability – written and oral	\$ 1,000,000 \$ 500,000 \$ 500,000 \$ 500,000	
	COMPREHENSIVE AUTO LIABILITY INCLUDING NON-OWNED (IF APPLICABLE)				Bodily Injury – each person Bodily injury – each accident Property Damage		
	UMBRELLA LIABILITY WORKMEN'S COMPENSATION AND EMPLOYER'S LIABILITY OTHER				Each accident Disease – each employee Disease – Policy Limit	\$ 500,000 \$ 500,000 \$ 1,000,000	
additional insur- otherwise reque	na and the Department named above red as required by statue, contract, purc ested. It is agreed that any insurance as shall be primary of other sources that may	chase order or vailable to the	materia withou CERTI	ally changed to tt thirty (30) of IFICATE IS NO UTHORIZED R	nat no policy shall expire, be affect the coverage available days written notice to the S T VALID UNLESS COUNTED EPRESENTATIVE OF THE 1	e to the State State. THIS RSIGNED BY	
NAME AND ADDRESS OF CERTIFICATE HOLDER			DATE	DATE ISSUED			
				AUTHOR	RIZED REPRESENTATIVE		